

Lincoln Police Department
James Peschong, Chief of Police
575 South 10th Street
Lincoln, Nebraska 68508

402-441-7204
fax: 402-441-8492



MAYOR CHRIS BEUTLER

lincoln.ne.gov

March 16, 2012

Mayor Beutler and City Council
City of Lincoln
City County Building
Lincoln, NE

Mayor Beutler and Members of the City Council:

An investigation has been made regarding the application of The Watering Hole, 1321 'O' Street requesting a class C liquor license.

This request is due to ownership changes.

Bryan McFarland, owner has requested that he be approved as the manager of the liquor license.

Background information on the applicant will be omitted as he is a currently approved liquor license manager

The required training was completed on September 8th 2011.

Stockholder information has been included for your review.

If this application is approved, it should be with the understanding that it conforms to all the rules and regulations of Lincoln, Lancaster County and the State of Nebraska.


JIM PESCHONG, Chief of Police



A nationally accredited law enforcement agency



PREMISE INFORMATION

Trade Name (doing business as) THE WATERING HOLE

Street Address #1 1321 O STREET

Street Address #2 _____

City LINCOLN

County LANCASTER

Zip Code 68508

Premise Telephone number 402.438.3054

Is this location inside the city/village corporate limits:



YES



NO

Mailing address (where you want to receive mail from the Commission)

Name THE WATERING HOLE

Street Address #1 762 W LAKESHORE COURT

Street Address #2 _____

City LINCOLN

State NE

Zip Code 68528

**DESCRIPTION AND DIAGRAM OF THE STRUCTURE TO BE LICENSED
READ CAREFULLY**

In the space provided or on an attachment draw the area to be licensed. This should include storage areas, basement, outdoor area, sales areas and areas where consumption or sales of alcohol will take place. If only a portion of the building is to be covered by the license, you must still include dimensions (length x width) of the licensed area as well as the dimensions of the entire building. No blue prints please. Be sure to indicate the direction north and **number of floors** of the building.

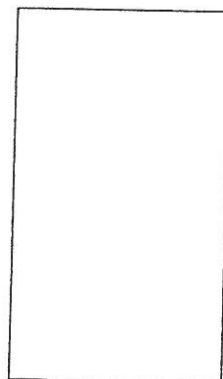
****For on-premise consumption liquor licenses minimum standards must be met by providing at least two restrooms**

Length 130 feet

Width 25 feet

PROVIDE DIAGRAM OF AREA TO BE LICENSED BELOW OR ATTACH SEPARATE SHEET

MAIN FLOOR OF A TWO STORY BUILDING APPROXIMATELY 25' WIDE AND 130' LONG AND BASEMENT AREA APPROXIMATELY 22' WIDE AND 130' LONG



O STREET



NORTH

RECEIVED

JAN 03 2012

**NEBRASKA LIQUOR
CONTROL COMMISSION**

APPLICANT INFORMATION

1. READ CAREFULLY. ANSWER COMPLETELY AND ACCURATELY.

Has anyone who is a party to this application, or their spouse, EVER been convicted of or plead guilty to any charge. Charge means any charge alleging a felony, misdemeanor, violation of a federal or state law; a violation of a local law, ordinance or resolution. List the nature of the charge, where the charge occurred and the year and month of the conviction or plea. Also list any charges pending at the time of this application. If more than one party, please list charges by each individual's name.

☒ YES ☐ NO

If yes, please explain below or attach a separate page.

Name of Applicant	Date of Conviction (mm/yyyy)	Where Convicted (city & state)	Description of Charge	Disposition
Bryan McFarland				see attached
				RECEIVED JAN 03 2012 NEBRASKA LIQUOR CONTROL COMMISSION

2. Are you buying the business of a current retail liquor license?

☒ YES ☐ NO

If yes, give name of business and liquor license number

49599

a) Submit a copy of the sales agreement

b) Include a list of alcohol being purchased, list the name brand, container size and how many

c) Submit a list of the furniture, fixtures and equipment

3. Was this premise licensed as liquor licensed business within the last two (2) years?

☒ YES ☐ NO

If yes, give name and license number THE WATERING HOLE 49599

4. Are you filing a temporary operating permit to operate during the application process?

☐ YES ☒ NO

If yes:

a) Attach temporary operating permit (T.O.P.) (form 125)

b) T.O.P. will only be accepted at a location that currently holds a valid liquor license.

5. Are you borrowing any money from any source, include family or friends, to establish and/or operate the business?

☒ YES ☐ NO

If yes, list the lender(s) seller carryback from current owner

%APPEND-E-OPENIN, error opening HT_ROOT:[HTTP\$NOBODY]RECBDLIS; as input -RMS-E-FNF, file not found %DELETE-W-SEARCHFAIL, error searching for HT_ROOT:[HTTP\$NOBODY]RECHDLIS;* -RMS-E-FNF, file not found %DELETE-W-SEARCHFAIL, error searching for HT_ROOT:[HTTP\$NOBODY]RECBDLIS;* -RMS-E-FNF, file not found



LINCOLN POLICE DEPARTMENT PUBLIC RECORD CRIMINAL HISTORY

This is a list of criminal citations and arrests by the Lincoln Police Department for this person since 1980.

- Arrests or citations by any other law enforcement agency are not included.
- Arrests where no charges were filed are only included during the most recent year.
- Charges that were sent to diversion are only included during the most recent 2 years.
- Charges that were dismissed are only included during the most recent 3 years.
- Any arrest over 1 year old, that has no disposition, is not included.
- Minor traffic infractions and cases when the subject was under the age of 16 or cases transferred to juvenile court are not included.

If the phrase "***END OF LISTING***" does not appear at the bottom of this report, then this list is not complete.

FOR: BRYAN ANDREW MCFARLAND , Male, DOB:

Date of listing: 12-15-2009

CODES FOR CRIMINAL HISTORY (I)=Infraction(M)=Misdemeanor(F)=Felony(O)=Other

Arrested 12-14-1996	for (M)3RD DEG ASSAULT	Case
Disposed 03-28-1997	as (M)DISTURBING THE PEACE	Cit#
FOUND GUILTY		
01 YRS PROB DISCHARGED OFF PROBATION 03-27-98		
Cited on 01-02-1995	for (M)ASSAULT, STRIKE OR CAUSE BODILY INJURY	Ca
Disposed 04-19-1995	as (M)DISTURBING THE PEACE	Cit#
FOUND GUILTY Fined \$100.00		
Cited on 07-18-1992	for (M)CONSUME ALCOHOLIC LIQUOR IN PUBLIC	Case
Disposed 09-30-1992	as (M)CONSUME ALCOHOLIC LIQUOR IN PUBLIC	Cit#
FOUND GUILTY Fined \$100.00		
Arrested 08-23-1986	for (M)DRIVE DURING SUSPENSION - 1ST OFFENSE	Ca
Disposed 02-13-1987	as (M)DRIVE DURING SUSPENSION - 1ST OFFENSE	Cit#
FOUND GUILTY Fined \$250.00 & Sentenced 10 DAYS		

JAN 03 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

Cited on 03-28-1986	for (M)UNLAWFUL TO MAKE FALSE STATEMENT TO OFFIC	Cas.
Disposed 05-09-1986	as (M)UNLAWFUL TO MAKE FALSE STATEMENT TO OFFIC	Cit#
FOUND GUILTY Fined \$100.00		

*** END OF LISTING ***

RECEIVED

JAN 03 2012

**NEBRASKA LIQUOR
CONTROL COMMISSION**

RECEIVED

Manager's information must be completed below PLEASE PRINT CLEARLY

JAN 03 2012

Gender: ☒ MALE ☐ FEMALE

NEBRASKA LIQUOR

Last Name: McFARLAND First Name: BRYAN MI: A

CONTROL COMMISSION

Home Address (include PO Box if applicable): 762 W Lakeshore CourtCity: Lincoln County: Lancaster Zip Code: 68528Home Phone Number: 402.261.8280 Business Phone Number: 402.438.3054

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Oakland, CA

Are you married? If yes, complete spouse's information (Even if a spousal affidavit has been submitted)

☐ YES☐ NO☒ LEGALLY SEPARATED

Spouse's information

Spouses Last Name: HOLDEN McFARLAND First Name: ANITA MI: K

Social Security Number: _____ Drivers License Number & State: _____

Date Of Birth: _____ Place Of Birth: Seattle, WA**APPLICANT & SPOUSE MUST LIST RESIDENCE(S) FOR THE PAST TEN (10) YEARS****APPLICANT****SPOUSE**

CITY & STATE	YEAR FROM	YEAR TO	CITY & STATE	YEAR FROM	YEAR TO
Lincoln, NE	2003	now	Lincoln, NE	2011	now
Henderson, NV	2001	2003	Henderson, NV	2001	2011
			**Winter home in Arizona		

JAN 03 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

North Carolina

Office United States
Attorney General
Washington, D.C.
Dear Sir:
I have the honor to acknowledge the receipt of your letter of the 10th inst. in relation to the proposed amendment to the Constitution of the United States, and in reply to inform you that the same has been forwarded to the Department of Justice for their consideration.

SIGNATURE OF BEARER / SIGNATURE DU TITULAIRE / FIRMA DEL TITULAR

PASSPORT
PASSEPORT
PASAPORTE

UNITED STATES OF AMERICA

Type / Type / Tipo Code / Code / Código Passport No. / No. du Passeport / No. de Pasaporte

Surname / Nom / Apellidos

McFARLAND

Given Names / Prénoms / Nombres

BRYAN ANDREW

Nationality / Nationalité / Nacionalidad

UNITED STATES OF AMERICA

Date of birth / Date de naissance / Fecha de nacimiento

Place of birth / Lieu de naissance / Lugar de nacimiento

CALIFORNIA, U.S.A.

Date of issue / Date de délivrance / Fecha de expedición

14 Nov 2011

Date of expiration / Date d'expiration / Fecha de caducidad

13-Nov-2021

Endorsements / Mentions Spéciales / Anotaciones

SEE PAGE 27

Sex / Sexe / Sexo

M

Authority / Autorité / Autoridad

United States

Department of State



P<USAMC<FARLAND<<BRYAN<ANDREW<<<<<<<<<<<<<<
4853954743USA(4M2111131247726140<281620

RECEIVED

JAN 03 2012

NEBRASKA LIQUOR

CONTROL COMMISSION

NEBRASKA www.dmv.ne.gov
OPERATORS LICENSE

4a License No. **4a ISS** **12-13-2010**

3 DOB **4b EXP** **9 Class** **0**

9a End **NONE** **12 Rest.** **NONE**

15 Sex **M** **16 Hgt** **601** **17 Wgt** **225** **19 Hair** **BRN**

18 Eyes **BLU**

1 **BRYAN A MCFARLAND**
8 **762 W LAKESHORE CT**
LINGOLN, NE 68528

5 **DD 0540000027300000**

DONOR **7**

DAVE HEISTERMAN, GOVERNOR

Bryce

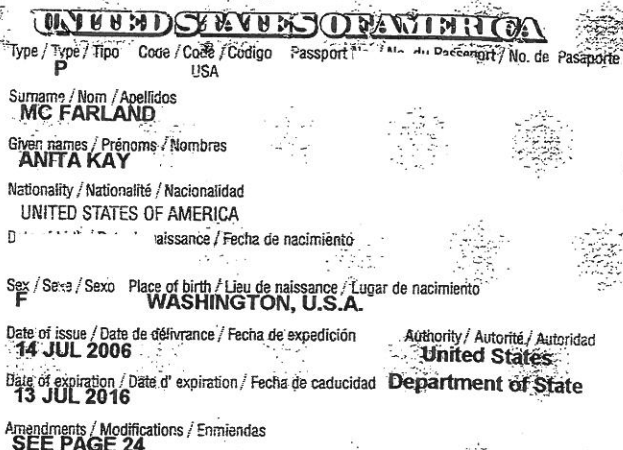
Nebraska

~~JAN 0~~ 3 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

El Secretario de Estado de los Estados Unidos de América por el presente solicita a las autoridades competentes permitir el paso del ciudadano o nacional de los Estados Unidos aquí nombrado, sin demora ni dificultades, y en caso de necesidad, prestarle toda la ayuda y protección lícitas.

NOT VALID UNTIL SIGNED



P<USAMC<FARLAND<<ANITA<KAY<<<<<<<<<<<<<<<<
2187964773USA 1F1607130<<<<<<<<<<<<<<<<06

RECEIVED

JAN 03 2012

NEBRASKA LIQUOR

CONTROL COMMISSION

NEBRASKA www.dmv.ne.gov
USA NE

OPERATORS LICENSE

4a License No. **3** DOB **08-29-2011**
4a ISS **08-29-2011**
4b EXP **08-29-2011**

9a End **NONE** 9 Class **O**
12 Rest. **NONE**


15 Sex **F** 16 Hgt **506** 17 Wgt **125**
18 Eyes **BRO** 19 Hair **BRO**

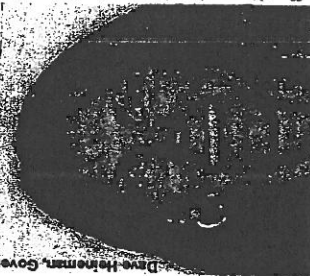
1 ANITA K HOLDEN MCFARLAND
8 762 W LAKESHORE CT
LINCOLN, NE 68528

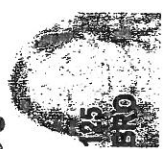
5 DD 054000243700000


Anita K Holden

David Heinemann, Governor









APPLICATION FOR LIQUOR LICENSE
LIMITED LIABILITY COMPANY (LLC)
INSERT - FORM 3b

NEBRASKA LIQUOR CONTROL COMMISSION
301 CENTENNIAL MALL SOUTH
PO BOX 95046
LINCOLN, NE 68509-5046
PHONE: (402) 471-2571
FAX: (402) 471-2814
Website: www.lcc.ne.gov

Office Use

RECEIVED

JAN 03 2012

NEBRASKA LIQUOR
CONTROL COMMISSION

All members including spouse(s), are required to adhere to the following requirements:

- 1) All members spouse(s) must be listed
- 2) Managing/Contact member and all members holding over 25% interest and their spouse(s) (if applicable) must submit fingerprints (2 cards per person)
- 3) Managing/Contact member and all members holding over 25 % shares of stock and their spouse (if applicable) must sign the signature page of the Application for License form 100 (even if a spousal affidavit has been submitted)

Attach copy of Articles of Organization (Articles must show barcode receipt by Secretary of States office)

Name of Registered Agent: Bryan McFarland

Name of Limited Liability Company that will hold license as listed on the Articles of Organization

Mo Chara, LLC

#1015375

LLC Address: 762 W Lakeshore Court

City: Lincoln State: NE Zip Code: 68528

LLC Phone Number: 402.419.4464 LLC Fax Number: _____

Name of Managing/Contact Member

Name and information of contact member must be listed on following page

Last Name: McFarland First Name: Bryan MI: A

Home Address: 762 W Lakeshore Court City: Lincoln

State: NE Zip Code: 68528 Home Phone Number: 402.261.8280


Signature of Managing/Contact Member

ACKNOWLEDGEMENT

State of Nebraska

County of Lancaster

The foregoing instrument was acknowledged before me this

December 30 2011

by Bryan A McFarland
name of person acknowledge

Date

Angela R Cleal

Affix Seal



List names of all members and their spouses (even if a spousal affidavit has been submitted)

Last Name: McFarland First Name: Bryan MI: A

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): Legally Separated from Anita Holden McFarland

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership Bryan McFarland 100%

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

RECEIVED
JAN 03 2012
NEBRASKA LIQUOR
CONTROL COMMISSION

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____

Last Name: _____ First Name: _____ MI: _____

Social Security Number: _____ Date of Birth: _____

Spouse Full Name (indicate N/A if single): _____

Spouse Social Security Number: _____ Date of Birth: _____

Percentage of member ownership _____